

## APPLICATION FOR A LICENSE TO CONDUCT A CHILD CARE FACILITY

☐ First Application

☐ Application for Renewal

In accordance with the provisions of Title 38, Chapter 7, *Code of Alabama 1975*, application is hereby made for a license to conduct or operate the following child care facility or facilities.

☐ Child Care Institution

☐ Day Care Center

☐ Group Home

☐ Nighttime Center

☐ Child-Placing Agency

☐ Special Activities Program

I request the Department to begin the licensing study.

Applicant/Owner:

\_\_\_\_\_  
Name of Person/Corporation

\_\_\_\_\_  
Social Security Number of Applicant/Owner

\_\_\_\_\_  
Name and Title of Person Submitting Application \*

Have you ever been arrested, charged or convicted of a criminal offense?

☐ Yes   ☐ No   If yes, give details of when, where, and the nature of the incident.

Have you ever been investigated for suspected child abuse/neglect?

☐ Yes   ☐ No   If yes, give details of when, where, and the nature of the incident.

I / We certify that the information given on this application is true and correct to the best of my / our knowledge. I / we understand that any misrepresentation of information may be grounds for denial of the application.

Signed by:

\_\_\_\_\_  
Person Submitting Application

\_\_\_\_\_  
Number and Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
County

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Telephone Number

Date: \_\_\_\_\_

Mail to: Alabama Department of Human Resources  
Office of Resource Management  
50 Ripley Street  
Montgomery, Alabama 36130

\* Attach statement verifying that person submitting application has authority to do so (if applicable).

Your Social Security number is required by the Department's administrative rules in order to provide an individual identification, a mechanism of matching criminal record information and an identification for purposes of Title XX contract and client services.